

SESSION: DC 44  
 VIEWER: #89  
 TARGET: 8038  
 TAPE: T-628

Boxes are provided to the right of each question. Only one box should be checked for each question asked. If you have any comments which you would like to make emphasizing the accuracy of the information or with reference to any information not generally covered in this format, please write them on the reverse of this page.

### Response to Tasking

### Responses\*

Does information provided satisfy your intelligence collection requirement?

☐ YES    ☐ IN PART    ☒ NO

### Accuracy

Geographical location (terrain, water, river, etc.)

☐ YES    ☐ IN PART    ☒ NO

Large scale man-made objects (docks, silos, buildings, etc.)

☐ YES    ☐ IN PART    ☒ NO

Small scale man-made objects (tanks, computers, antennas, etc.)

☐ YES    ☒ IN PART    ☐ NO

Target ambience (research, production, administration, troop movement, etc.)

☐ YES    ☐ IN PART    ☒ NO

Activity (nuclear testing, CBR, SIGINT monitoring, etc.)

☐ YES    ☐ IN PART    ☒ NO

Personality (Physical, plans, actions, traits, etc.)

☐ YES    ☐ IN PART    ☒ NO

### Utility

Please check which best describes the utility of the information provided (in view of what is known at this time, understanding that additional information could raise or lower such an interim assessment at a later date)

☐ VERY USEFUL

☐ USEFUL

☒ MARGINAL

☐ NONE

☐ CANNOT BE DETERMINED AT THIS TIME

\*YES - indicates a full agreement with what is known to be fact about the target. NO - indicates a total lack of agreement with what is known to be fact about the target.

Additional tasking

Is additional tasking required?  
(If yes, please write what that tasking  
is on the back of the form)

☐ YES ☒ NO

Did the attached information add to  
information derived from other intell-  
igence sources?

☐ YES ☒ NO

Did the attached information aid in tasking  
other intelligence resources by providing  
targeting information?

☐ YES ☒ NO

Albert J. Bari

(Signed) SIGNATURE

ALBERT J. BARI, GS-13

(Printed) NAME, GRADE

ASST OPS OFFICER, USAOG

(Printed) TITLE, or OFFICE

1. CUSTOMER OFFICE <b>USA09</b>		2. INFORMATION REQUESTED DATE YEAR MONTH DAY <b>1980</b>	
3. TARGET COUNTRIES <b>IRAN</b>		4. PROJECT NUMBER <b>2130A</b>	
5. SOURCE NUMBER <b>NFN 240317</b>		6. NUMBER REPORTS SUBMITTED FOR PROJECT	
7. REPORT IDENTIFICATION NUMBERS		8. REFERENCES A. REQUIREMENTS (CITE) (ICR/CIR/DIRM S/DIRM 9) <input type="checkbox"/> B. INITIATIVE REPORT <b>NA</b>	
9. REASON FOR EVALUATION (select one) <input type="checkbox"/> A. ICR RESPONSE <input checked="" type="checkbox"/> B. COLLECTORS REQUEST <input type="checkbox"/> C. SELECTED BY ANALYST		10. VALUE OF INFORMATION (select one) <input type="checkbox"/> A. OF MAJOR SIGNIFICANCE <input type="checkbox"/> B. OF VALUE <input checked="" type="checkbox"/> C. OF NO VALUE	
11. TYPES OF PRODUCTS TO BENEFIT FROM USE OF REPORTED INFORMATION <input type="checkbox"/> A. BASIC INTELLIGENCE <input type="checkbox"/> B. CURRENT INTELLIGENCE <input checked="" type="checkbox"/> C. ESTIMATIVE INTELLIGENCE <input type="checkbox"/> D. S&T INTELLIGENCE		12. REASON INFORMATION IS OF NO VALUE (select one only) <input checked="" type="checkbox"/> A. TOO FRAGMENTARY <input type="checkbox"/> B. DUPLICATIVE <input type="checkbox"/> C. UNTIMELY <input type="checkbox"/> D. NOT RESPONSIVE TO TASKING CITED	
13. DEGREE OF REQUIREMENT SATISFACTION (select one only) <input type="checkbox"/> A. COMPLETELY SATISFIED <input type="checkbox"/> B. PARTIALLY SATISFIED <input checked="" type="checkbox"/> C. NOT SATISFIED AT ALL		14. NAME OF PRODUCT(S)	
15. COLLECTION GUIDANCE (Mandatory unless 13A, above, is checked) <i>Provided information much too fragmentary and lacking detail. Consequently, can not realistically evaluate whether to obtain substance or not.</i>			

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SG1A

90002-1

SECURITY CLASSIFICATION

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(remarks continued)

*in verifying subject's activities while in the country*  
*I grant**seen in a helicopter. This seems  
proved, and of little value*

## 17. FOREIGN DISCLOSURE DATA

A. EVALUATORS RECOMMENDATION  
(select one only)

- ☒ RELEASABLE EVALUATION NOT REQUESTED  
☐ EVALUATION IS NOT RELEASABLE  
☐ PARA(S) \_\_\_\_\_, ABOVE, IS/ARE  
RELEASABLE TO THE GOVT(S) OF \_\_\_\_\_

B. FOREIGN DISCLOSURE AUTHORITY DECISION  
(select one only)

- ☒ EVALUATION IS NOT RELEASABLE  
☐ NON-CAVEATED PORTIONS OF THIS EVAL, AS  
INDICATED, MAY BE REL TO THE AUTH REPS  
OF THE GOVT(S) OF \_\_\_\_\_  
AT THE DISCRETION OF THE ORIGINATOR.

18. EVALUATOR'S NAME

*ALBERT J. BARI*19. EVALUATOR'S OFFICE  
SYMBOL*1A GPC-OP*20. SECURITY INSTRUCTIONS  
(DOWNGRADING, DECLASSIFICATION,  
AND SPECIAL MARKINGS)

21. DATE EVALUATED

YEAR

MONTH

DAY

*1981**JUNE**10*

22. ORIGINATOR OF REQUEST FOR INFORMATION

*USAOG*

23. (Signature of evaluator)

*Albert J. Bari*

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